## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

23,369-110

| CLAIMS AS FILED - PART I   |  |   |                                       |                               |                              |                  | SMALL E    | OTHER THAN             |      |                     |                        |
|--|--|---|---------------------------------------|-------------------------------|------------------------------|------------------|------------|------------------------|------|---------------------|------------------------|
|  |  |   | (Column 1)                            |                               | (Column 2)                   |                  | TYPE [     | TYPE                   |      | OR SMALL ENTITY     |                        |
| TOTAL CLAIMS   |  |   | 51                                    |                               |                              |                  | RATE       | FEE                    | ] [  | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED                          |                               | NUMBER EXTRA                 |                  | BASIC FEE  | 370.00                 | OR   | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 5/ minus 20=                          |                               | * 31                         |                  | X\$ 9=     |                        | OR   | X\$18=              | 558                    |
| INDEPENDENT CLAIMS   |  |   | / minus 3 =                           |                               | * 5                          |                  | X42=       |                        | OR   | X84=                | 420                    |
| MU   | LTIPLE DEPEN                                   | IDENT CLAIM PI                            | ESENT                                 |                               |                              |                  | +140=      |                        | OR   | +280=               |                        |
| * If   | the difference                                 | in column 1 is                            | less than zero, enter "0" in column 2 |                               |                              | olumn 2          | TOTAL      | <u> </u>               | OR   | TOTAL               | 1718                   |
| CLAIMS AS AMENDED - PART II  |  |   |                                       |                               |                              |                  |            |                        |      | OTHER               | THAN                   |
| (Column 1) (Column 2) (Column 3)   |  |   |                                       |                               |                              |                  | SMALL      | ENTITY                 | OR   | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA | RATE       | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                 | **                            |                              | =                | X\$ 9=     |                        | OR   | X\$18=              |                        |
|  | Independent                                    | *   | Minus                                 | ***                           | T OL A114                    | =                | X42=       |                        | OR   | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .   |  |   |                                       |                               |                              |                  | +140=      |                        | OR   | +280=               |                        |
|  |  |   |                                       |                               |                              |                  | TOTAL      |                        | OB   | TOTAL               |                        |
|  |  |   |                                       |                               |                              |                  | ADDIT. FEE |                        | Un . | ADDIT. FEE          |                        |
|  | 0016   | (Column 1)                                |                                       |                               | mn 2)<br>HEST                | (Column 3)       |            |                        | 1 1  |                     |                        |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVI                  | IBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA | RATE       | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                 | **                            |                              | =                | X\$ 9=     |                        | OR   | X\$18=              |                        |
|  | Independent                                    | *   | Minus                                 | ***                           |                              | =                | X42=       |                        | OR   | X84=                |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                       |                               |                              |                  |            | <u> </u>               | On   |                     | <u> </u>               |
| · ·  |  |   |                                       |                               |                              |                  | +140=      |                        | OR   | +280=               |                        |
|  |  |   |                                       |                               |                              |                  |            |                        | OR   | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                |                                       | (Colu                         | mn 2)                        | (Column 3)       | ADDIT. FEE |                        |      | ADDITITEE           | · · · · · ·            |
| AMENDMENT C  | **************************************         | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE       | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                 | **                            |                              | =                | X\$ 9=     |                        | OR   | X\$18=              |                        |
|  | Independent                                    | *   | Minus                                 | ***                           |                              | Ξ.               | X42=       |                        |      | X84=                | <u> </u>               |
| 【  | FIRST PRESE                                    | NTATION OF M                              | JLTIPLE DEPENDENT                     |                               | T CLAIM                      |                  | A42=       |                        | OR   | A04=                | ļ                      |
|  | 16 Alban and 11 - 1                            | +140=                                     |                                       | OR                            | +280=                        |                  |            |                        |      |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                       |                               |                              |                  |            |                        |      |                     |                        |